

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 22409-00388-US	
Application Number 10/564,182-Conf. #8012		Filed May 24, 2006	
For METHOD AND DEVICE FOR NOISE REDUCTION			
Art Unit 2615		Examiner Paul Disler	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee	Small Entity Fee
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$130	\$65 \$ 490.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$490	\$245 \$ 555
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1110	\$555 \$ 865
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$1730	\$865 \$ 1175
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175 \$ 1175
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input checked="" type="checkbox"/> Payment by credit card.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0185 .			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number 39,410			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
_____/Michael G. Verga/ Signature		_____/January 21, 2009 Date	
_____/Michael G. Verga/ Typed or printed name		_____/ (202) 331-7111 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of 1 forms are submitted.			

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: January 21, 2009 Signature: _____/Michael G. Verga/_____ (Michael G. Verga)